

**July 12, 2006**

# **Montana Medicaid Notice**

## **Ambulance Providers**

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### **Ambulance Notification Time Limits Change**

**Effective July 1, 2006**

Ambulance providers will have 180 days following a non-scheduled transport to notify Mountain Pacific and obtain authorization for all non-scheduled ambulance services before submitting a claim. When a client has retroactive eligibility, the provider will have 180 days from the eligibility determination date to notify the authorizing agency of the transport. This applies to transports with dates of services on or after July 1, 2006.

This change replaces the previous notification limit of 60 days from transport or 90 days from eligibility determination date to notify the authorizing agency. Providers still have 12 months from the date of transport to submit a clean claim. The Department will not consider claims that have not been authorized or that are past the timely filing limits, even if another payer is involved. Watch the website for an updated version of the provider manual.

Please contact the department at 444-4189 if you have any questions about this notice.

### **Contact Information**

For claims questions or additional information, contact Provider Relations:

**Provider Relations toll-free in- and out-of-state: 1-800-624-3958**

**Helena: (406) 442-1837**

Visit the Provider Information website:

**<http://www.mtmedicaid.org>**